

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		12-15-99
O.I.P.E. CLASSIFIER			7 01-03-00
FORMALITY REVIEW	DS	65685	1 12 2000
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	3/17/00
2	10/22/00
3	7/1/01
4	3/8/02
5	11/1/02
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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